

FROM McANDREWS, HELD, &amp; MALLOY

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**Christopher R. Carroll**

(Depositor's name)

*Christopher R. Carroll*

(Signature)

*June 29, 2004 July 1, 2004*

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/064,160	06/17/2002	Vernon Thomas Jensen	121612	6861

TITLE OF INVENTION: 3D RECONSTRUCTION SYSTEM AND METHOD UTILIZING A VARIABLE X-RAY SOURCE TO IMAGE DISTANCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SONG, HOON K	2882	378-197000

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**McAndrews, Held & Malloy, Ltd.****1 Peter J. Vogel****3 Michael A. Dellapenna**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. [Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.]

(A) NAME OF ASSIGNEE

**GE MEDICAL SYSTEMS GLOBAL  
TECHNOLOGY COMPANY, LLC**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**WAUKESHA, WISCONSIN**

Please check the appropriate assignee category or categories (will not be printed on the patent);

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**TO:** **ISSUE FEE**  
**Examiner Hoon K. Song**  
**Application No. 10/064,160**  
**Attorney Docket No. 33-XZ-121612**

**Fax:** **703/746-4000**

**FROM:** **Christopher R. Carroll**  
**Fax:** **312/775-8100**

**DATE:** **July 1, 2004**  
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